	ΩĐ	0 E7	Short Form	•		3 No 1545 1150
חחכ	77	0-EZ	Return of Organization Exempt From Income T		1 2	2 016
		I	Under section S01(c), 527, or 4947(a)(1) of the internal Revenue Code (except private for	loundate	lous)	
epzri	laren, of	I the Treasury	► Do not enter social security numbers on this form as it may be made pub			n to Public spection
er.	l Revenu	ue Service	► Information about Form 990-EZ and its instructions is at www.irs.gov/form	η 99 0.		
	or the 2 eck / aug	-	ar year, or tax year beginning , 2016, and anding C Nane of organization	n smak	yer identifica	, 20
٦.	acs sati		Country Roads Animal Rescue Society	D Conquis	лует коепилсы 47-3854	
_ №	erre chan	700		E Teloph	47-3854 hano numbar	003
= "	dad mitum Automitum	n n/tennunsted	6313 Chathern Rd	l	645-299-1	
₹	nended n		City or town, state or province country, and ZIP or foreign postal code	,	p Exemption	
14	onder ton	n pending	Oklahoma City, Oklahoma 73132	<u> </u>	ber	
	ocounti ebsite					rganization is not
			country:oedsanimatiescue.com control = (2:501(c)(3)		to attach Sci 30, 990-EZ, o	
			Corporation Trust Association Tother non-profil anim			1 230-111
Ad	id lines	5b, 6c, and	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	85385	are	
ort.	li, colu	umn (B) belov	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ	1	<u>s</u>	
Pa	rt I		e, Expenses, and Changes in Net Assets or Fund Balances (see the i	instruc	tions for P	'art I)
_			the organization used Schedule O to respond to any question in this Part I			
-			ons, gifts, grants, and similar amounts received	!	1	120,978
Ì			ervice revenue including government fees and contracts in dues and assessments	·	3	0
1		Investment	•	h	4	0
l		_	ount from sale of essets other than inventory 5a	. 0		
Ì			or other basis and sales expenses	0		
1	¢	Gain or (los	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)	.]	5c	0
		_	d fundraising events	}		
		Gross inco \$15,000)	ome from gaming (attach Schedule G if greater than	ļ	ł	
Rovenue		•	time from fundraising events (not including \$ a of contributions	<u>- </u> - (ļ	
6			me from fundraising events (not including <u>o</u> of contributions aising events reported on line 1) (attach Schedule G if the	s]	
T			th gross income and contributions exceeds \$15,000\ 66		1	
			t expenses from gaming and fundraising events			
	d	Net income	e or (loss) from garning and fundraising events (add lines 6a and 6b and sub	otract		
į		line 6c)		Į.	6d	o
ļ			s of inventory, less returns and allowances . 7a	0		
ļ			of goods sold	D	.	_
			it or (loss) from sales of inventory (Subtract line 7b from line 7a) nue (describe in Schedule O)	}	7c	
-			nue (describe in Schedule O) nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	•	8 9	120 976
+			I similar amounts paid (list in Schedule O)		10	120,978 0
			aid to or for members	Г	11	0
88	12	Salaries, ot	ther compensation, and employee benefits	[12	0
<u>ş</u>			al fees and other payments to independent contractors RECEIVED	1	13	52 770
×			· · · · · · · · · · · · · · · · · · ·	. اد	14	68 208
ا ت	15 16		ublications, postage, and shipping senses (describe in Schedule O)	\${ }	15	650
			enses (describe in Schedule 0) B DEC 1 4 2017 Censes Add lines 10 through 16	31 <u> </u>	18	0
	18		enses Add lines 10 through 16	+-+	18	121 628 -650
rets			or fund balances at beginning of year (from line 27, column (7) (thust agree	with		
Net Assets			r figure reported an prior year's return)	1	19	0
<u>ة</u>		Other char	iges in net assets or fund balances (explain in Schedule O)		20	0
			or fund balances at end of year. Combine lines 18 through 20	. ▶ [21	0
or F	open.	ork Reduct	fon Act Notice, see the separate instructions. Cal No 1084zi		Form	990-EZ (2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete II the organization is a section 501(c)(C) organization or a section 4947(a)(1) remezempt charitable trust. ➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047 2016

Department of the Treasury

Open to Public

410	the annulation of	·/O () A PERSONAL SC	(1000 01000 12) 0100 121		Employer Identification	msp=cnon	
MB/TTO	Country Roads An.		we Society		147-3954	1005	
Par						ons.	
	organization is not a private foundation						
1	A church, convention of churche						
2		A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)((ii)).					
4	A medical research organization					(ki). Enter the	
•	hospital's name, city, and state		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,. =	
5	An organization operated for the section 170(b)(1)(A)(iv). (Complete		college or university	owned or open	ated by a government	tal unit described in	
	A federal, state, or local government						
-7-	An organization that normally re described in section 170(b)(1)(A	ψ (vi). (Complet	e Part II)	•	emmental unit or fror	n the general public	
8	A community trust described in			•			
9	4. An agricultural research organization university or a non-land-grant university	college of agr	iculture (see instruction	ons) Enter the n	ame, city, and state of	f the college or	
10	An organization that normally receipts from activities related to support from gross investment acquired by the organization after	its exempt function	nctions—subject to ci related business taxal	ertain exception ble income (less	is, and (2) no more that section 511 tax) from	p fees, and gross in 331/a% of its businesses	
	An organization organized and o		•	•			
12	An organization organized and o of one or more publicly support Check the box in lines 12a through	ied organizatio	ns described in sect i	on 509(a)(1) or	section 509(a)(2). Se	e section 509(a)(3).	
а	~ - · · ·	-	• • • • •		•	-	
ø	the supported organization(s supporting organization You) the power to	regularly appoint or e	lect a majority of			
b	☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.						
c	 Type III functionally integra its supported organization(s) 					ally integrated with,	
d	Type III non-functionally integrated in that is not functionally integrated instructions.	ated The orga	nization generally mu	st satisfy a distr	ibution requirement ar		
0	Check this box if the organiz functionally integrated, or Ty	ation received be til non-fund	a written determination	on from the 198	WE VEW OF TWO	o II, Type III	
1	Enter the number of supported or	ganizations	•		080		
9	Provide the following information: (i) Name of supported organization	(ii) EIN	(祖) Type of organization(s).		on (M Amount of more tary	(M) Amount of	
	(i) vimia ci supportos organizacion	(u) EIN	(described on lines 1–10 above (see instructions))	Estade in vital control	DEN interpretations!	other support (see	
				Yes No			
(A)							
(B)	-						
(C)							
(D)							
(E)							
Tota)						
For P	aperwork Reduction Act Notice, see the in	structions for For	rm 990 oz 990-EZ.	Cat No. 11285	F Schedule A (F	orm 990 or 990-EZ) 2018	

048 0106

art	Support Schedule for Organiza' (Complete only if you checked the If the organization fails to qualify	e box on line	10 of Part I	or if the orga			der Part II.
ecti	on A. Public Support			Ju, piodoc de	Musica Care	··/	
alen	idar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")					120,978	120,978
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 78	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons					120,978	17.0,478
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8 C	Add lines 7a and 7b Public support. (Subtract line 7c from line 6)					120,678	120,478
ecti	ion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 10a	Amounts from lino 6 Gross income from interest, dividenos, payments received on securities loans, rents, royalties and income from similar sources					1201578	120,478
b	Unrolated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .						
c	Add lines 10a and 10b					>	
11	Net Income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Exptain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						120,578
·4 —_	First five years, if the Form 990 is for the organization, check this box and stop her	re	· <u>·</u>	d. third, fourth	, or fifth tax y	rear as a section	on 501(c)(3)
	ion C. Computation of Public Suppor					T-2 T-	adden-
15 16	Public support percentage for 2016 (line 8 Public support percentage from 2015 Sch	edule A. Part	III, line 15	is, column (f))		15	% 500 %
	ion D. Computation of Investment Inc			urling 12 col			NOV-
17 18	Investment income percentage for 2016 (I			y ane 13, colui	mn (tj)	17	160 % W
19a	Investment income percentage from 2015 Schedule A, Part III, line 17 33'n% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33'n%, and line 17 is not more than 33'n%, check this box and stop here. The organization qualifies as a publicly supported organization						
b	331n% support tests - 2015. If the organization 18 is not more than 331n%, check this b	ation did not d	heck a box on	line 14 or line	19a, and line 1	6 is more than :	33°73%, and
20	Private foundation. If the organization did	d not check a	box on line 14	, 19a, or 19b, o			
					Sc	hedule A (Form 99	0 or 990-EZ) 2018